

**FEDERAL RESERVE SYSTEM****Consumer Advisory Council****Notice of Meeting of Consumer Advisory Council**

The Consumer Advisory Council will meet on Thursday, June 27, 2002. The meeting, which will be open to public observation, will take place at the Federal Reserve Board's offices in Washington, DC, in Dining Room E on the Terrace level of the Martin Building. **Anyone planning to attend the meeting should register, for security purposes, no later than Tuesday, June 25 by completing the form found on-line at: <http://www.federalreserve.gov/forms/cacregistration.cfm> Additionally, attendees must present photo identification to enter the building.**

The meeting will begin at 9:00 a.m. and is expected to conclude at 1:00 p.m. The Martin Building is located on C Street, NW, between 20th and 21st Streets.

The Council's function is to advise the Board on the exercise of the Board's responsibilities under the various consumer financial services laws and on other matters on which the Board seeks its advice. Time permitting, the Council will discuss the following topics:

**Privacy Rules** - Discussion of the effectiveness of the privacy rules one year after the effective date of the interagency privacy regulations.

**Community Reinvestment Act** - Discussion of issues identified in connection with the current review of Regulation BB, which implements the Community Reinvestment Act.

**Financial Literacy** - Discussion of issues raised by the Jump\$tart Coalition's survey and recent research on learning techniques and the implications for design and delivery of financial literacy training.

**Committee Reports** - Council committees will report on their work.

Other matters initiated by Council members also may be discussed.

Persons wishing to submit views to the Council on any of the above topics may do so by sending written statements to Ann Bistay, Secretary of the Consumer Advisory Council, Division of Consumer and Community Affairs, Board of Governors of the Federal Reserve System, Washington, DC 20551. Information about this meeting may be obtained from Ms. Bistay, 202-452-6470.

Board of Governors of the Federal Reserve System, June 3, 2002.

**Jennifer J. Johnson,**  
*Secretary of the Board.*

[FR Doc. 02-14205 Filed 6-5-02; 8:45 am]

**BILLING CODE 6210-01-S**

**FEDERAL RETIREMENT THRIFT INVESTMENT BOARD****Sunshine Act Meeting**

**TIME AND DATE:** 10:00 a.m. (EDT) June 17, 2002.

**PLACE:** 4th Floor, Conference Room, 1250 H Street, NW., Washington, DC.

**STATUS:** Parts will be open to the public and part closed to the public.

**MATTERS TO BE CONSIDERED:****Parts Open to the Public**

1. Approval of the minutes of the May 20, 2002, Board member meeting.

2. Thrift Savings Plan activity report by the Executive Director.

**Part Closed to the Public**

Discussion of litigation.

**CONTACT PERSON FOR MORE INFORMATION:** Thomas J. Trabucco, Director, Office of External Affairs, (202) 942-1640.

Dated: June 3, 2002.

**Elizabeth S. Woodruff,**

*Secretary of the Board, Federal Retirement Thrift Investment Board.*

[FR Doc. 02-14278 Filed 6-3-02; 4:50 pm]

**BILLING CODE 6760-01-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Agency for Healthcare Research and Quality****Contract Review Meeting**

In accordance with section 10(a) of the Federal Advisory Committee Act as amended (5 U.S.C., Appendix 2), announcement is made of an Agency for Healthcare Research and Quality (AHRQ) Technical Review Committee (TRC) meeting. This TRC's charge is to review contract proposals and provide recommendations to the Acting Director, AHRQ, with respect to the technical merit of proposals submitted in response to a Request for Proposals (RFP) regarding a "Resource Center for Primary Care Practice—Based Research Networks (PBRNs)". The RFP was published in the FedBizOpps on March 28, 2002.

The upcoming TRC meeting will be closed to the public in accordance with the Federal Advisory Committee Act (FACA), section 10(d) of 5 U.S.C., Appendix 2 and procurement regulations, 41 CFR 106-6.1023 and 48 CFR 315.604(d). The discussions at this meeting of contract proposals submitted in response to the above-referenced RFP are likely to reveal proprietary information and personal information

concerning individuals associated with the proposals. Such information is exempt from disclosure under the above-cited FACA provision that protects the free exchange of candid views, and under the procurement rules that prevent undue interference with Committee and Department operations.

*Name of TRC:* The Agency for Healthcare Research and Quality—"Resource Center for Primary Care Practice-Based Research Networks (PBRNs)"

*Date:* June 26, 2002.

*Place:* Agency for Healthcare Research & Quality, 6010 Executive Blvd, 4th Floor Conference Center, Rockville, Maryland 20852.

*Contact Person:* Anyone wishing to obtain information regarding this meeting should contact David Lanier, Center for Primary Care Research, Agency for Healthcare Research and Quality, 6011 Executive Blvd, Suite 201, Rockville, Maryland, 20852, 301-594-1489.

Dated: May 30, 2002.

**Carolyn M. Clancy,**

*Acting Director.*

[FR Doc. 02-14159 Filed 6-5-02; 8:45 am]

**BILLING CODE 4160-90-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and Prevention**

[60Day-02-59]

**Proposed Data Collections Submitted for Public Comment and Recommendations**

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 498-1210.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the

burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

*Proposed Project:* Assessment of the Effectiveness of the Center for Disease Control and Prevention's (CDC) Guidelines for Prevention of Surgical Wound Infections—New—National Center for Infectious Diseases (NCID), Centers for Disease Control and Prevention (CDC).

In the U.S. an estimated 31.8 million surgical procedures are performed each year. Despite advances in infection

control practices, surgical technique and antisepsis, and the introduction of antimicrobial prophylaxis, surgical site infections (SSIs) remain a leading cause of healthcare-associated morbidity and mortality. An estimated 2%–5% of surgical procedures done each year are complicated by SSI. In addition, SSIs result in an additional 7.4 days of hospitalization and \$400–\$2,600 in healthcare costs/infection, resulting in an annual cost of \$130–\$845 million/year. Since the early 1980's CDC has developed and disseminated guidelines for the prevention of SSIs. However, the degree of practitioner and institutional compliance with the guideline and the impact of the CDC-recommended precautions in preventing SSIs have not been determined. The Institute of Medicine and the Healthcare Infection

Control Practices Advisory Committee have strongly advised that systematic guideline evaluation be a standard component of the guideline development process.

The purpose of this project is to assess the effectiveness of CDC Guidelines to Prevent Surgical Site Infection. The objective of this study is to determine knowledge, attitudes, and practices of surgeons regarding the Guidelines.

A mail and Internet survey will be conducted among a representative sample of members of the American College of Surgeons. The survey will ask about surgical practices and opinions related to surgical site infections. Participation in the survey will be voluntary. There is no cost to the respondents other than their time.

Respondents	Number of respondents	Number of responses/respondent	Avg. burden/respondent (in hours)	Total burden (in hours)
American College of Surgeons .....	2134	1	30/60	1067
Total .....				1067

Dated: May 24, 2002.

**Nancy E. Cheal,**

*Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.*

[FR Doc. 02-14128 Filed 6-5-02; 8:45 am]

**BILLING CODE 4163-18-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30DAY-30-02]

**Agency Forms Undergoing Paperwork Reduction Act Review**

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 498-1210. Send written comments to CDC, Desk Officer, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503. Written comments should be received within 30 days of this notice.

**Proposed Project**

National Public Health Performance Standards Program Local Public Health System Assessment—New—Public

Health Practice Program Office (PHPPO), Centers for Disease Control and Prevention (CDC).

Since 1998, the CDC National Public Health Performance Standards Program has convened workgroups with the National Association of County and City Health Officials (NACCHO), the Association of State and Territorial Health Officials (ASTHO), the National Association of Local Boards of Health (NALBOH), the American Public Health Association (APHA), and the Public Health Foundation (PHF) to develop performance standards for public health systems based on the ten Essential Services of Public Health. In the fall of 2000, CDC conducted field tests with the local public health survey instruments in the States of Hawaii, Minnesota, and Mississippi.

CDC is now proposing to implement a voluntary data collection to assess the capacity of local public health systems to deliver the Essential Public Health Services. Electronic data submission will be the method of choice. If computer technology in local jurisdictions does not support electronic submission, hard-copy survey instruments will be available. Local jurisdictions using hard-copy survey instruments will receive assistance from State or local level field coordinators for web-based data entry.

Local health departments will respond to the survey on behalf of the collective body of representatives from

the local public health system. An estimated 33 percent of local health departments will complete the local instrument in year one, 30 percent in year two and 25 percent in year three. The total burden hours are estimated to be 67,200.

Data collection period	Respondents	Re-sponses per respondent	Average burden response (in hrs.)
Year 1 ...	875	1	24
Year 2 ...	1167	1	24
Year 3 ...	875	1	24

Dated: May 29, 2002.

**Nancy Cheal,**

*Acting Associate Director for Policy, Planning, and Evaluation, Centers for Disease Control and Prevention.*

[FR Doc. 02-14127 Filed 6-5-02; 8:45 am]

**BILLING CODE 4163-18-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. 02N-0055]

**Agency Information Collection Activities; Submission for OMB Review; Comment Request; Infant Formula Recall Regulations**

**AGENCY:** Food and Drug Administration, HHS.